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## BIB DATA SHEET

CONFIRMATION NO. 5799

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/597,753	09/20/2006	514	1625	33647-US-PCT		
<b>RULE</b>						
<b>APPLICANTS</b> Rene Hersperger, Munchenstein, SWITZERLAND; Philipp Janser, Basel, SWITZERLAND; Emil Pfenninger, Allschwil, SWITZERLAND; Hans Juerg Wuethrich, Kehrsatz, SWITZERLAND; Wolfgang Miltz, Basel, SWITZERLAND;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP05/01362 02/10/2005						
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0403038.3 02/11/2004						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/26/2007						
Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Initials	SWITZERLAND	0	14	3
Verified and Acknowledged	/JOHN MABRY/ Examiner's Signature					
<b>ADDRESS</b>						
NOVARTIS INSTITUTES FOR BIOMEDICAL RESEARCH, INC. 220 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139 UNITED STATES						
<b>TITLE</b>						
Chemokine receptor antagonists						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		